INSTRUCTIONS

UST UNAUTHORIZED RELEASE (LEAK)/CONTAMINANT SITE REPORT

EMERGENCY

Indicate whether emergency response personnel and equipment were involved at any time. If so, a Hazardous Material Incident Report should be file with the State Office of Emergency Services (OES). Copies of the OES report form may be obtained at your local underground storage tank permitting agency. Indicate whether the OES report has been filed as of the date of this report.

LOCAL AGENCY ONLY

To avoid duplicate notification pursuant to Health and Safety code Section 25180.5, a government employee should sign and date the form in this block. A signature here <u>does not</u> mean that the leak has been determined to pose a significant threat to human health or safety, only that notification procedures have been followed if required.

REPORTED BY

Enter your name, telephone number, and address. Indicate which party you represent and provide company or agency name.

RESPONSIBLE PARTY

Enter name, telephone number, contact person and address of the party responsible for the leak. The responsible party would normally be the tank owner.

SITE LOCATION

Enter information regarding the tank facility. At a minimum, you must provide the facility name and full address.

IMPLEMENTING AGENCIES

Enter names of the local agency and Regional Water Quality Control Board involved.

SUBSTANCES INVOLVED

Enter the name and quantity lost of the hazardous substance involved. Room is provided for information on two substances if appropriate. If more than two substances leaked, list the two of most concern for cleanup.

DISCOVERY/ABATEMENT

Provide information regarding the discovery and abatement of the leak.

SOURCE/CAUSE

Indicate source(s) of leak. Check box(es) indicating cause of leak.

CASE TYPE

Indicate the case type category for this leak. Check on box only, Case type is based on the most sensitive resource affected. For example, if both soil and ground water have been affected, case type will be "Ground Water". Indicate "Drinking Water" only if one or more municipal or domestic water wells have actually been affected. A "Ground Water" designation does not imply that the affected water cannot be, or is not used for drinking water, but only that water wells have not yet been affected. It is understood that case type may change upon further investigation.

CURRENT STATUS

Indicate the category which best describes the current status of the case. Check one box only. The response should be relative to the case type. For example, if case type is "Ground Water". Then "Current Status" should refer to the status of the ground water investigation or cleanup, as opposed to that of soil. Descriptions of options follow:

No Action Taken – no action has been taken by responsible party beyond initial report of Leak.

<u>Leak Being Confirmed</u> – leak suspected at site, but has not been confirmed.

<u>Preliminary Site Assessment Workplan Submitted</u> – Workplan/proposal requested of/submitted by responsible party to determine whether ground water has been, or will be, impacted as a result of the release.

<u>Pollution Characterization</u> – responsible party is in the process of fully defining the extent of contamination in soil and ground water and assessing impacts on surface and/or ground water. Remediation Plan – remediation plan submitted evaluating long term remediation options.

Proposal and implementation schedule for appropriate remediation options also submitted. Cleanup Underway – implementation of remediation plan.

<u>Post Cleanup Monitoring in Progress</u> – periodic ground water or other monitoring at site, as necessary, to verify and/or evaluate effectiveness of remedial activities.

<u>Case Closed</u> – regional board and local agency in concurrence that no further work is necessary at the site.

IMPORTANT: THE INFORMATION PROVIDED ON THIS FORM IS INTENDED FOR GENERAL STATISTICAL PURPOSES ONLY AND IS NOT TO BE CONSTRUED AS REPRESENTING THE OFFICIAL POSITION OF ANY GOVERNMENTAL AGENCY

REMEDIAL ACTION

Indicate which actions have been used to cleanup or remediate the leak. Descriptions of options follow:

<u>Cap Site</u> – install horizontal impermeable layer to reduce rainfall infiltration.

Containment Barrier – install vertical dike to block horizontal movement of containment.

Excavate and Dispose – remove contaminated soil and dispose in approved site.

Excavate and Treat – remove contaminated soil and treat (includes spreading or land farming).

<u>Remove Free Product</u> – remove floating product from water table.

<u>Pump and Treat Groundwater</u> – generally employed to remove dissolved contaminants.

<u>Enhanced biodegradation</u> – use of any available technology to promote bacterial decomposition of contaminants.

Replace Supply – provide alternative water supply to affected parties.

Treatment at Hookup – install water treatment devices at each dwelling or other place of use.

<u>Vacuum Extract</u> – use pumps or blowers to draw air through soil.

<u>Vent Soil</u> – bore holes in soil to allow volatilization of contaminants.

No Action Required – incident is minor, requiring no remedial action.

 $\underline{COMMENTS}$ – Use this space to elaborate on any aspects of the incident.

SIGNATURE – Sign the form in the space provided.

DISTRIBUTION

If the form is completed by the tank owner or his agent, retain the last copy and forward the remaining copies intact to your local tank permitting agency for distribution.

- 1. Original Local Tank Permitting Agency.
- Regional Water Quality Control Board.
- 3. Local Health Officer and County Board of Supervisors or their designee to receive Proposition 65 notifications.
- Owner/responsible party.